

## REGULATION 1081 MINIMUM STANDARDS FOR LEGISLATIVELY MANDATED COURSES

### CRISIS INTERVENTION BEHAVIORAL HEALTH TRAINING FOR FIELD TRAINING OFFICERS

#### Expanded Course Outline (8 hours)

#### COURSE GOAL

This course will provide the trainee with the minimum topics mandated by 13515.28 of the California Penal Code. Field training officers are required to have 8 hours of crisis intervention behavioral health training. ***Training must include classroom instruction and instructor led active learning, and must be taught in segments that are at least 4 hours long. 25 is the recommended maximum number of students for this course.***

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#### MINIMUM TOPICS

- a. Understanding stigma
- b. Strategies that contribute to stigma reduction
- c. Cultural relevance
- d. Perspective of individuals or families who have experience with persons who have mental illness, intellectual disabilities, and substance use disorders
- e. Cause and nature of mental illness and intellectual disabilities
- f. Identify indicators of mental illness, intellectual disabilities, and substance use disorders

- g. Distinguish between mental illness, intellectual disabilities, and substance use disorders
- h. Appropriate language usage for interacting with distressed persons
- i. Community and state resources and how these resources can be utilized by law enforcement to serve persons with mental illness and intellectual disabilities
- j. Appropriate responses for a variety of situations involving persons with mental illness, intellectual disabilities, and substance use disorders
- k. Conflict resolution and de-escalation techniques

## **COURSE OBJECTIVES**

- 1. Demonstrate knowledge of the role stigma has in society and across cultures in regards to mental illness, intellectual disabilities, and substance use disorders
- 2. Demonstrate knowledge of strategies that help reduce stigma associated with mental illness, intellectual disabilities, and substance use disorders, including the perspective of individuals or families
- 3. Demonstrate knowledge of the cause and nature of mental illness and intellectual disabilities
- 4. Demonstrate the ability to identify indicators of mental illness, intellectual disabilities, and substance use disorders and distinguish between them
- 5. Demonstrate knowledge of community and state resources and how to utilize them to serve individuals and families with mental illness and intellectual disabilities.
- 6. Demonstrate knowledge of the laws protecting individuals with mental illness and how to apply them to incidents involving persons with mental illness and persons having a mental health crisis
- 7. Demonstrate the ability to utilize de-escalation and conflict resolution to resolve a variety of situations involving individuals in crisis

## **EXPANDED COURSE OUTLINE**

### **I. INTRODUCTION/ORIENTATION**

- A. Introduction, Registration and Orientation
- B. Course Objectives/Overview/Exercises
- C. Safety

### **II. STIGMA**

(a/c)

- A. Provide context for stigma and the role it plays in mental illness, intellectual disabilities, and substance use disorders;

1. The meaning of stigma – a mark of disgrace or shame associated with a particular circumstance, quality, or person
2. The consequences of stigmatization – social isolation, fear, violence, mistrust, prejudice and discrimination

B. Discuss both historical and modern day stigmatization of mental illness, intellectual disabilities, and substance use disorders as it pertains to;

1. Societal views and treatment of mental illness
2. The evolution of medical treatment
3. Dramatizations by the news and entertainment industry

C. Compare and contrast the way different cultures treat mental illness, intellectual disabilities, and substance use disorders in the areas of;

1. Stigmatization
2. The social impact on families and individuals
3. Barriers to seeking help and participating in treatment

### III. STIGMA REDUCTION

(b/d)

A. Identify mechanisms to reduce personal bias against people with mental illness, intellectual disabilities, and substance use disorders:

1. Learn the facts
2. Get to know people who have experiences with mental illness, intellectual disabilities, and substance use disorders

B. Identify mechanisms to reduce stigmatism against people with mental illness, intellectual disabilities, and substance use disorders:

1. Speak out against the display of false beliefs and negative stereotypes
2. Speak openly of personal experiences
3. Don't discriminate, judge, or stereotype
4. Show respect, treat with dignity

C. Present the perspective of individuals and families experienced with;

1. Mental illness
2. Intellectual disabilities
3. Substance use disorders (co-occurring)

*Suggestion: Utilize guest speakers and/or videos*

### IV. MENTAL ILLNESS/INTELLECTUAL DISABILITIES/SUBSTANCE USE DISORDERS (e/f/g/h)

Note: Information utilized for this learning objective will be derived from the Diagnostic and Statistics Manual of Mental Disorders, 4<sup>th</sup> Edition (DSM-IV). *Suggested topics; anxiety disorders (including Post-Traumatic Stress Disorder), mood disorders (depression and bi-polar disorder, including suicidal behavior and risk assessment), psychotic disorders, impulse control disorders, Autism Spectrum Disorder, Down Syndrome, dementia and Alzheimer's disease, co-occurring disorders.*

A. Mental Illness

1. Describe the cause and nature
2. Identify Indicators
3. Discuss and develop appropriate language and rapport building strategies

B. Intellectual Disabilities

1. Describe the cause and nature
2. Identify indicators
3. Discuss and develop appropriate language and rapport building strategies

C. Substance Use Disorders

1. Identify indicators
2. Discuss and develop appropriate language and rapport building strategies

***Suggested Learning Activity:*** *This learning activity is intended to reinforce the ability to identify and differentiate between mental illness, intellectual disabilities, and substance use disorders and determine appropriate responses when coming into contact with same. Provide trainees with case studies, scenarios, or video examples of individuals that display indicators of mental illness, intellectual disabilities, and substance use disorders to the trainees. Can be done as a class or in small groups.*

*In each example provided, trainees will:*

- *identify the indicators of mental illness, intellectual disabilities, and substance use disorders*
- *based on indicators, distinguish between mental illness, intellectual disabilities, and substance use disorders*
- *cite or demonstrate appropriate language and rapport building strategies for the identified mental illness, intellectual disability or substance use disorder*

V. IDENTIFYING AND UTILIZING RESOURCES

(i)

A. Community

1. City services and resources
2. County services and resources
3. Nonprofit organizations
4. Local government resources

## B. State

1. Services and resources
2. Nonprofit organizations

*Suggestion: Include the National Alliance on Mental Illness (NAMI) and Veteran's Services*

## VI. LAWS (this is an optional section – not mandated by the law)

1. Discuss how the following laws are applied in encounters with individuals with mental illness, how they preserve the rights of individuals with mental illness, and protect public safety
  - A. Lanterman-Petris-Short (LPS) Act California Welfare and Institutions Code 5000 et seq. involuntary civil commitments
  - B. Case law; The Tarasoff Decision 17 Cal. 3d 425, 551 P. 2d 334, 131 Cal Rptr. 14 (Cal. 1976) Notifications
  - C. California Penal Code 5150, (5150(e), 5150F) (1), and 5150.2 Involuntary psychiatric hold
  - D. California Welfare and Institutions Code 5585 – Children's Civil Commitment and Mental Health Act of 1988
  - E. Health Insurance Portability and Accountability Act (HIPPA)
  - F. California Welfare and Institutions Code Section 8102 Confiscation of deadly weapons
2. Determine if an individual meets the criteria for a psychiatric hold and evaluation as described in 5150 of the California Penal Code and 5585 of the California Welfare and Institutions Code
  - A. Mental, physical, and emotional state of the individual
  - B. History
  - C. Other pertinent information (including witness statements and state of physical surroundings when applicable).

## VII. DE-ESCALATION AND CONFLICT RESOLUTION IN A VARIETY OF SITUATIONS (j/k)

1. Initial Response
  - A. Stabilize and secure the scene
  - B. Minimize factors that create unnecessary exigency or excitement
  - C. Gather intelligence
  - E. Establish a plan
  - F. Gather resources
2. De-escalation and Conflict Resolution
  - A. Assess individual's mental, physical and emotional state
  - B. Apply appropriate techniques to build rapport and communication

C. Motivate individual to cooperate

### 3. Completion

A. Decide on appropriate disposition of the individual based on the totality of the circumstances and available resources

B. Provide resources and information to all involved parties

*Suggested learning activity – This learning activity will allow trainees to practice skills learned in the earlier activity while incorporating new material for problem solving.*

*1) Trainees will participate in role play scenarios or use interactive videos that depict a variety of situations involving individuals in crisis. Trainees will demonstrate knowledge of the class material through;*

- Initial response and scene management*
- Recognition of indicators of mental illness, intellectual disability, or substance abuse disorder*
- De-escalation and conflict resolution congruent with identified mental illness, intellectual disability, or substance abuse disorder*
- Final resolution of the incident with appropriate disposition of the individual and providing resources to involved parties.*

### VIII. Student Evaluations and Conclusion